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CONFIRMATION NO. 9243

<b>SERIAL NUMBER</b> 10/678,011	<b>FILING OR 371(c) DATE</b> 10/02/2003 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1644	<b>ATTORNEY DOCKET NO.</b> BAF-19202/29
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## APPLICANTS

Bret A. Ferree, Cincinnati, OH;

\*\* CONTINUING DATA \*\*\*\*\*

none e.c.

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

none e.c.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 12/23/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 26	<b>INDEPENDENT CLAIMS</b> 1	
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance					
Verified and Acknowledged	<i>af</i> Examiner's Signature	<i>af</i> Initials			

## ADDRESS

25006

## TITLE

Methods of preventing adhesions following laminectomies and other surgical procedures

<b>FILING FEE RECEIVED</b> 439	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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